	, N.J.		Application or Docket Number												
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003										1276+686					
		SMALL ENTITY TYPE COR				OTHER THAN									
T	OTAL CLAIMS		1	4		•		RATI	T	EE	1	RATE	FEE		
FOR			MARKET FILED		NUMBER EXTRA			BASIC FEE 385.00		OR	BASIC FEE	770.00			
T	TAL CHARGE	ABLE CLAIMS	Frainus 20-		· 0			XS 9=		OR	X\$18•				
INDEPENDENT CLAIMS			/ minus 3 =		. 0		] ·	. X43=		OR	X86=				
140	ATPLE DEPE	NOENT CLAIM P	RESENT			0		+145=			OR	.+290=			
* If the difference in column 1 is less than zero, enter "O" in column 2									12	88	•	TOTAL			
	CLAIMS AS AMENDED - PART II											OTHER			
_	(Column 1) (Column 2) (Column 3)							SHAL	LENT	_	OR	SMALL			
EMTA		REMADENG AFTER AMENDMENT		PREVIO PAID	BER	PRESENT		RATE	TIO	NAL EE		RATE	ADDI- TIONAL PEE		
AMENDMENT	Total	-19	Minus	- 2	0	•	]	X\$ 9-		1	OR	X\$18-			
AME	Independent	• 1	Minus		3	- 1		X43=			OR	X86-			
_	PERST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		П	OR	+290-			
6-16-05								ADDIT, FI			OR	TOTAL ADDIT FEE			
	(Cotumn 1) (Cotumn 2) (Cotumn 3)														
AMENOMENT B		CLAIMS REMARKING AFTER AMENDMENT		NUME NUME PREVIO PAID	ER USLY	PRESENT EXTRA		RATE	AD TIO	NAL		RATE	ADDI- TIONAL FEE		
Š Ž	Total	.6	Minus	- 2	0	- //	1	X\$ 9-	1.		OR	X\$18=	PEE		
ME	independent	• 7	Minus		3_	.9.		X43=	+	_	OR	X88=			
L	FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM								T		OR	+290=			
E	00/-							ADDIT, FE			OR	TOTAL ADDIT FEE			
2	2.06	(Cohmn 1)		(Colum	nr 2)	(Column			-						
KTC		CLAIMS REMARKING AFTER AMERICMENT	•	HIGHE NUMB PREVIO	ER USLY	PRESENT EXTRA	71	RATE	AD	M		RATE	ADDI- TIONAL		
	Total		Minus		20	. —	11	X3.8×	1"	<b>5</b> /	OR.	X\$18a	<b>FEE</b> /		
AMENDMENT	ind pendent	• /	Minus '	•••	3	• =	]	X43=		$\overline{}$		X26=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									-	OR		-/		
	* Sine crity in column 1 is less than the entry in column 2, write "O" is column 3.  " If the "Rightest formion Previously Paid For" IN THOS SPACE is less than 30, enter "20."  ""If the "Rightest flumber Previously Paid For" IN THOS SPACE is less than 3, enter "2."									-	OR ,	101AL DOIL FEE	/		
		moer Proviously Pale ber Proviously Pale					•	nd in th		to box					
FORM	PTO-075 (Res. 10	60					Page	Pi and Tox	and C	es US		MINERI OF	constitut		